



McNees Wallace & Nurick LLC
attorneys at law

RECEIVED
CENTRAL FAX CENTER

OCT 28 2005

Routing #393
Client #21635-0032

FAX COVER LETTER

DATE: October 28, 2005

PLEASE DELIVER THE FOLLOWING PAGES:

TO: Commissioner for Patents FAX: (571) 273-8300

FROM: Shawn K. Leppo Direct Dial: (717) 237-5218

TOTAL NUMBER OF PAGES, INCLUDING THIS COVER LETTER: 5

MESSAGE:

Please acknowledge receipt of documents.

Transmittal Form
Certificate of Fax Transmittal
Change of Correspondence Address (Patent)
"Fee Address" Indication Form

Attorney Docket No.: 13DV-13713/11688 (21635-0032) US Patent No.: 6,706,325
Application No.: 09/944,909 Issued: 16-Mar-2004
Filed: 31-Aug-2001

FAX NUMBER: (717) 237-5300

PARALEGAL RESPONSIBLE: Kimberly A. Newell TELEPHONE: (717) 237-5239

*******CONFIDENTIALITY NOTE*******

The information and documents accompanying this transmission contain information from the law firm of McNees Wallace & Nurick LLC which is confidential and/or legally privileged. The information is intended solely for the use of the individual or entity named on this transmission sheet. If you are not the designated recipient, you are hereby notified that any disclosure, copying, distribution or taking of any action in reliance on the contents of this information is prohibited.

If you have received this transmission in error, please notify us by telephone immediately so that we can arrange for the return of the original documents to us at no cost to you and with reimbursement for cost you may have incurred in responding to this notification.

OCT 28 2005

PTO/SB/21 (02-04)

Approved for use through 07/31/2006 OMB 0631-0031
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMD control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/944,909 / US Pat. 6,706,325	
	Filing Date	31-Aug-2001 / Issue: 16-Mar-2004	
	First Named Inventor	SPITSBERG et al.	
	Art Unit	1762	
	Examiner Name	MEEKS, TIMOTHY HOWARD	
Total Number of Pages in This Submission	5	Attorney Docket Number	13DV-13713/11688 (21635-0032)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Certificate of Fax Transmittal Fee Address Indication Form
<div style="border: 1px solid black; padding: 2px; width: 150px; margin: 0 auto;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	McNees Wallace & Nurick LLC Shawn K. Leppo, Attorney Reg. No. 50,311
Signature	
Date	October 28, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Kimberly A. Newell		
Signature		Date	October 28, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OCT 28 2005

PTO/SB/123 (06-04)

Approved for use through 11/30/2005 OMB 0651-0035
Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

CHANGE OF CORRESPONDENCE ADDRESS Patent	Patent Number	6,706,325
Address to: Mail Stop Post Issue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Issue Date	16-Mar-2004
	Application Number	09/944,909
	Filing Date	31-Aug-2001
	First Named Inventor	SPITSBERG et al.
	Attorney Docket Number	13DV-13713/11688 (21635-0032)

Please change the Correspondence Address for the above-identified patent to:

☒ The address associated with Customer Number 6111

OR

☐ Firm or Individual Name

Address

City State ZIP

Country

Telephone Fax

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124)

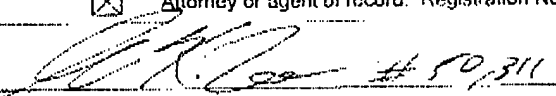
This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

I am the:

☐ Patentee.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 50,311.

Signature 

Typed or Printed Name Shawn K. Loppo

Date October 28, 2005 Telephone (717) 237-5218

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/07 (08-03)

Approved for use through 07/31/2006, OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile
transmitted to the United States Patent and Trademark Office

on October 28, 2005.

Date



Signature

Kimberly A. Newell

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this
certificate must identify each submitted paper.

Transmittal Form

Change of Correspondence Address - Patent

"Fee Address" Indication Form

Certificate of Fax Transmittal

Attorney Docket No.: 13DV-13713/11688 (21635-0032)

Application No.: 09/944,909 Filed: 31-Aug-2001

Patent No.: 6,706,325 Issued: 16-Mar-2004

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.